

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #  
(Ethics Commission filers)

2 Total pages filed:

3

3 CANDIDATE /  
OFFICEHOLDER  
NAME

TITLE FIRST MI  
Mr. Mark B.  
NICKNAME LAST SUFFIX  
Richardson Sr.

OFFICE USE ONLY

Date Received

4 CANDIDATE /  
OFFICEHOLDER  
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

5907 Eckhart Rd, #310, SA, TX 78240

☒ Change of Address

Date Hand-delivered or Date Postmarked

5 CAMPAIGN  
TREASURER  
NAME

TITLE FIRST MI  
Mr. Mark B.  
NICKNAME LAST SUFFIX  
Richardson Jr.

Receipt #

Amount

Date Processed

Date Imaged

6 CAMPAIGN  
TREASURER  
ADDRESS  
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  
5907 Eckhart Rd, #310, SA, TX 78240

7 CAMPAIGN  
TREASURER  
PHONE

AREA CODE PHONE NUMBER EXTENSION  
(210) 691 - 5232

8 REPORT TYPE

☐ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only)  
☒ July 15 ☐ 8th day before election ☐ Exceeded \$500 limit ☐ Final report (Attach C/OH - FR)

9 PERIOD  
COVERED

Month Day Year Month Day Year  
01 / 01 / 03 THROUGH 06 / 30 / 03

10 ELECTION

ELECTION DATE ELECTION TYPE  
Month Day Year  
05 / 03 / 03 ☐ Primary ☐ Runoff ☒ General ☐ Special

11 OFFICE

OFFICE HELD (if any)

12 OFFICE SOUGHT (if known)

Mayor of San Antonio

13 NOTICE  
OF DIRECT  
CAMPAIGN  
EXPENDITURE  
BY OTHER  
INDIVIDUALS

\*\* Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. \*\*

Name

Address / PO Box; Apt. / Suite #; City; State; Zip Code

☐ additional pages

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME

Mark B. Richardson Sr

15 ACCOUNT # (Ethics Commission files)

16 NOTICE  
FROM  
POLITICAL  
COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

☐ GENERAL☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages17 NO REPORTABLE  
ACTIVITY☐ Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)18 CONTRIBUTION  
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 0

EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ -

4. TOTAL POLITICAL EXPENDITURES

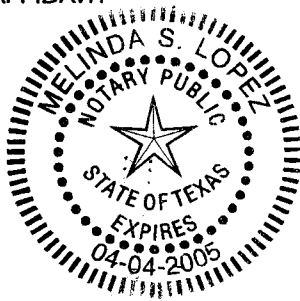
\$ 375.91

OUTSTANDING  
LOAN TOTALS

5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0

19 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Deena Mark B. Richardson, this the 29th day of December, 2004, to certify which, witness my hand and seal of office.

Melinda S. Lopez

Signature of officer administering oath

Melinda S. Lopez

Printed name of officer administering oath

Notary

Title of officer administering oath

# **POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS**

SCHEDULE G

RECEIVED  
CITY OF SAN ANTONIO  
CITY CLERK  
2003 DEC 29 A 8:19

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule G:

2

2 FILER NAME

Mark B. Richardson Sr.

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

Allied Advertising

6 Payee address; City; State; Zip Code

3700 Blanco Rd, SA, TX 78212

7 Purpose of expenditure (See instructions regarding type of information required.)

Campaign Buttons

8 Amount (\$)

\$99.25

☐ Reimbursement from political contributions intended

Date

Payee name

Mailbox Etc.

Payee address; City; State; Zip Code

5804 Babcock Rd, SA, TX 78240

Purpose of expenditure (See instructions regarding type of information required.)

P.O. Box for correspondence

Amount (\$)

\$41

☐ Reimbursement from political contributions intended

Date

Payee name

Cowboy AND Lady

Payee address; City; State; Zip Code

NW Center Flea Market

Purpose of expenditure (See instructions regarding type of information required.)

Vest

Amount (\$)

\$85

☐ Reimbursement from political contributions intended

Date

Payee name

The Pager Connection

Payee address; City; State; Zip Code

8131 IH10W, Ste #123, SA, TX 78230

Purpose of expenditure (See instructions regarding type of information required.)

(24hr) Campaign Automated Line

Amount (\$)

\$155.55

☐ Reimbursement from political contributions intended

Date

Payee name

Dollar Tree

Payee address; City; State; Zip Code

Store #1804 / PHONE #210-877-1919

Purpose of expenditure (See instructions regarding type of information required.)

Poster Boards for poster displays

Amount (\$)

\$5

☐ Reimbursement from political contributions intended

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule G

2004 DEC 29 A 8:19  
RECEIVED  
CITY OF SAN ANTONIO  
CITY CLERK

2 FILER NAME

Mark B. Richardson Sr.

3 ACCOUNT # (Ethics Commission filer's)

4 Date

1/28/03

5 Payee name

Mailbox Etc.

6 Payee address; City; State; Zip Code

5804 Babcock Rd, SA, TX 78240

7 Purpose of expenditure (See instructions regarding type of information required.)

B/W Copies for political literature

☐ Reimbursement from political contributions intended

Date

1/28/03

Payee name

(Roadrunner) Time Warner Cable

Payee address; City; State; Zip Code

Amount (\$)

\$45

Purpose of expenditure (See instructions regarding type of information required.)

Internet Svc / Informational, bus use

☐ Reimbursement from political contributions intended

Date

2/6/03

Payee name

City of SA council race

Payee address; City; State; Zip Code

Amount (\$)

\$25

Purpose of expenditure (See instructions regarding type of information required.)

Event Location: Canty line (IO)  
Campaign Contribution
☐ Reimbursement from political contributions intended

Date

Payee name

Payee address; City; State; Zip Code

Amount (\$)

Purpose of expenditure (See instructions regarding type of information required.)

☐ Reimbursement from political contributions intended

Date

Payee name

Payee address; City; State; Zip Code

Amount (\$)

Purpose of expenditure (See instructions regarding type of information required.)

☐ Reimbursement from political contributions intended

2004 DEC 27 A 9:55  
RECEIVED  
CITY OF SAN ANTONIO  
CITY CLERK

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED